

SOMAI 20:1

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Different THC/CBD ratios to enable a tailored treatment



Retail Price
£75



THC OIL

30mL

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THERAPEUTIC INDICATIONS

- Appetite Stimulating⁷
- CINV⁸
- Chronic Pain^{1,9}
- Spasticity⁴
- Palliative Care⁵
- Sleep Disorders⁶
- Other Indications as Clinically Justified

1. Therapeutic Goods Administration (TGA). "Guidance for the use of medicinal cannabis in the treatment of chronic non-cancer pain in Australia". January 25, 2024. <https://www.tga.gov.au/medicinal-cannabis-guidance-documents>. Accessed January 2024. 2. Larsen C, Shahinas J. Dosage, Efficacy and Safety of Cannabidiol Administration in Adults: A Systematic Review of Human Trials. J Clin Med Res. 2020;12(3):129-141. doi:10.14740/jocmr4090. 3. Bonaccorso S, Ricciardi A, Zangani C, Chiappini S, Schifano F. Cannabidiol (CBD) use in psychiatric disorders: A systematic review. NeuroToxicology. 2019; 74:282-298. doi:10.1016/j.neuro.2019.08.002. 4. Therapeutic Goods Administration (TGA). Guidance for the use of medicinal cannabis in the treatment of multiple sclerosis in Australia. January 25, 2024. <https://www.tga.gov.au/medicinal-cannabis-guidance-documents>. Accessed February 2022. 5. Therapeutic Goods Administration (TGA). Guidance for the use of medicinal cannabis in the treatment of palliative care patients in Australia. January 25, 2024. <https://www.tga.gov.au/medicinal-cannabis-guidance-documents>. Accessed January 2024. 6. Suraev A, Mills L, Abelev SV, Arkell TR, Lintzeris N, McGregor IS. Medical Cannabis Use Patterns for Sleep Disorders in Australia: Results of the Cross-Sectional CAMS-20 Survey. Nat Sci Sleep. 2023;15:245-255. doi: 10.2147/NSS.S390583. 7. Razmovski-Naumovski V, Luckett T, Amgarth-Duff I, Agar MR. Efficacy of medicinal cannabis for appetite-related symptoms in people with cancer: A systematic review. Palliat Med. 2022;36(6):912-927. doi: 10.1177/02692163221083437. 8. Therapeutic Goods Administration (TGA). Guidance for the use of medicinal cannabis in the prevention and management nausea and vomiting in Australia. January 25, 2024. <https://www.tga.gov.au/medicinal-cannabis-guidance-documents>. 9. Therapeutic Goods Administration (TGA). Guidance for the use of medicinal cannabis in the treatment of chronic non-cancer pain in Australia. January 25, 2024. <https://www.tga.gov.au/medicinal-cannabis-guidance-documents>. 10. MacCallum CA, Russo EB. Practical considerations in medical cannabis administration and dosing. European Journal of Internal Medicine. 2018; 49: 12-19. 11. Bhaskar A, Bell A, Boivin M, et al. Consensus recommendations on dosing and administration of medicinal cannabis to treat chronic pain: results of a modified Delphi process. J Cannabis Res. 2021; 3(1): 22. 12. Bergamaschi MM, et al. Cannabidiol reduces the anxiety induced by simulated public speaking in treatment-naïve social phobia patients. Neuropsychopharmacology. 2011;36(6):1219-26. 13. Larsen C, Shahinas J. Dosage, Efficacy and Safety of Cannabidiol Administration in Adults: A Systematic Review of Human Trials. J Clin Med Res. 2020;12(3):129-141. doi: 10.14740/jocmr4090. 14. Bhaskar A, Bell A, Boivin M, et al. Consensus recommendations on dosing and administration of medicinal cannabis to treat chronic pain: results of a modified Delphi process. J Cannabis Res. 2021; 3(1): 22. 15. Gulbransen G, et al. Cannabidiol prescription in clinical practice: an audit on the first 400 patients in New Zealand. BJGP Open. 2020;4(1):bjgpopen20X101010.

For Healthcare Practitioners Only

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SOMAI 20:1 Titration and Dosing



THESE TITRATION MODELS SERVE AS AN EXAMPLE AND MUST BE ADAPTED TO EACH PATIENT



| Days | Morning dose (mL of oral solution) | Evening dose (mL of oral solution) | Total daily dose (mL of oral solution) | THC total daily dose (mg) |
|---------|------------------------------------|------------------------------------|--|---------------------------|
| 1 - 2* | 0 | 0.125 | 0.125 | 2.5 |
| 3 - 4 | 0.125 | 0.125 | 0.250 | 5 |
| 5 - 6 | 0.125 | 0.250 | 0.375 | 7.5 |
| 7 - 8 | 0.250 | 0.250 | 0.500 | 10 |
| 9 - 10 | 0.250 | 0.375 | 0.625 | 12.5 |
| 11 - 12 | 0.375 | 0.375 | 0.750 | 15 |

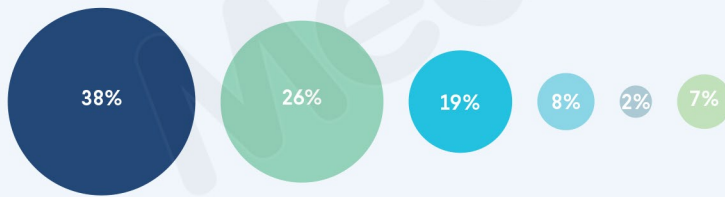
Titration scheme and practical dosing recommendations

The patient should take the minimum dose that provides effective symptom relief with tolerable side effects.¹⁰ The titration should be conservative, done with increments of 2.5 mg THC every 2 days (or with increments of 1.25 mg THC for fragile patients).¹⁰

The dosage protocol can be adjusted according to the patient's profile. Increase dose as necessary and as tolerated, up to 15 mg of THC. Daily THC doses exceeding 20–30 mg may elevate the risk of adverse events or lead to the development of tolerance without improving efficacy.¹⁰ Maximum recommended daily THC dose: 40 mg.^{10,13}

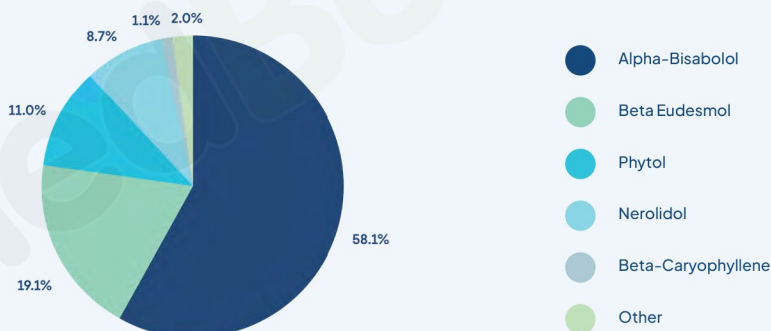
*Ideally, the administration should start with an evening dose to limit adverse events and encourage the development of tolerance.¹⁴

MINOR CANNABINOIDS PROFILE***



| Tests | Minor Cannabinoids Relative Content (%) |
|-------|---|
| CBG | 38% |
| CBN | 26% |
| CBC | 19% |
| CBD | 8% |
| THCVA | 2% |
| Other | 7% |

TERPENES PROFILE**



* Relative content of minor cannabinoids is calculated based on the total of minor cannabinoids.

** These percentages are relative and have been determined using high-performance liquid chromatography as part of our quality control process. Please note that they may vary from batch to batch.